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APPLICANTS

ERIC RHODES QUINN, ALPHARETTA, GA;
 CYNTHIA RENNOLDS, SAN DIGO, CA; *OA.*

** CONTINUING DATA *****
NONE OA

** FOREIGN APPLICATIONS *****
NONE OA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 6	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>Olisa</i> Examiner's Signature	<i>mw</i> Initials		

ADDRESS

38823
 THOMAS, KAYDEN, HORSTEMEYER & RISLEY, LLP/
 BELL SOUTH I.P. CORP
 100 GALLERIA PARKWAY
 SUITE 1750
 ATLANTA, GA
 30339

TITLE

INTEGRATED TONE-BASED AND VOICE-BASED TELEPHONE USER INTERFACE

FILING FEE RECEIVED 1064	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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